

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>69207</i>	<i>4/17/99</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>45</i>	<i>4/15</i>
FORMALITY REVIEW	<i>N.M.</i>	<i>71628</i>	<i>4.22.98</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	8/10/98
2	8/10/98
3	8/10/98
4	8/10/98
5	8/10/98
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8	8/10/98
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47	8/10/98
48	8/10/98
49	8/10/98
50	8/10/98

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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